

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 622246	RECEIPT DATE:	08 / 15 /
IA NUMBER:	PCT/ IB99 / 00288	IA FILING DATE:	✓ 02 / 08 /
FAMILY NAME:	HAMERY	DELAY WAIVED (Y/N):	
GIVEN NAME:	DOMINIQUE	DEMAND RECEIVED (Y/N):	✓
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	✓ 02 / 16 /
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	
ATTORNEY DOCKET NUMBER:	11345.021001	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 7132288
			FAX
NAME:	JONATHAN P OSHA		
	ROSENTHAL & OSHA		
STREET:	700 LOUISIANA STREET		
	SUITE 4550		
CITY:	HOUSTON		
STATE/COUNTRY:	TX	ZIP:	77002
EMAIL:			
APPLICATION TITLES:			
	PROCESSING OF DIGITAL PICTURE DATA IN A DECODER		

TAB TO LAST POSITION,PUSH SEND



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

SERIAL NUMBER 09/622,246	FILING DATE 08/15/2000 RULE -	CLASS 386	GROUP ART UNIT 2715	ATTORNEY DOCKET NO. 11345.021001	
APPLICANTS Dominique Hamery, Rueil Malmaison, FRANCE; ** CONTINUING DATA ***** <i>eb</i> THIS APPLICATION IS A 371 OF PCT/IB99/00288 02/08/1999 ** FOREIGN APPLICATIONS ***** <i>eb</i> EUROPEAN PATENT OFFICE (EPO) 98400367.3 02/16/1998 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/08/2000					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>eb</i> Acknowledged <i>eb</i> Examiner's Signature <i>eb</i> Initials <i>eb</i>		STATE OR COUNTRY FRANCE	SHEETS DRAWING 5	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
ADDRESS 2511					
TITLE Processing of digital picture data in a decoder					
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		